								Application or Docket Number					
•	PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003									•		005	>	
CLAIMS AS FILED - PART I								SMALL ENTITY TYPE			OTHER THAN		
70	TAL CLAIMS		(Column	_	(Column 2)					OF.	SMALL		
			(-(-		· ·		-	RATE FEE BASIC FEE 385.00		ł	RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA		B	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			7 7 minus 20=				· L	XS 9=		OR	X\$18=	5 Li	
	EPENDENT C		ກ໌minus 3 =					X43=		OR	X86=)	
ML	LTIPLE DEPEN	IDENT CLAIM P	RESENT				-145=			OR	÷290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L.	TOTAL			TOTAL	820	
CLAIMS AS AMENDED - PART II										OR	OTHER	THAN	
	(Column 1) . (Column 2) (Column 3)						S	MALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	7/6/03	CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	2	3	=	. ;	XS 9=		ÓЯ	XS18=		
	Independent	· 3	Minus	***	ろ	= /		X43=		OR	X86≤		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=	/		+290=		
								TOTAL		OF	TOTAL		
								ADDIT. FEE OR ADDIT. FEE					
_		(Column 1)		(Colun		(Column 3)			4551				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	*		=	. 5	KS 9= _.		OR	X\$18=		
	incependent	•	Minus	***		=	;	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR	+290=		
							ب	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)), 1. PEC (• • •		avvii. FEE		
	\	CLAIMS		HIGH	EST			γ	ADDI-			ADDI-	
NTC		REMAINING AFTER AMENDMENT		PREVICE PAID I	USLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT C	Total	•	Minus	**	<u> </u>	2 .	 	(\$ 9=	125	OR	X\$18=		
	Independent	•	Minus	***		E .		(43=			X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=		OR	7002		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								•	OR	+290=		
 (f the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE is	less tha	n 20, enter "20."	ADD	TOTAL IT. FEE		OR	TOTAL ADDIT, FEE		
		mber Previously Pa iber Previously Pai							propriate box	in co	ymn 1.		

FORM PTO-875 (Rev 10:03)

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